19. CORRESPONDENCE ADDRESS



22850

(703) 413-3000 FACSIMILE: (703) 413-2220

| Name: | Marvin J. Spivak | Registration No.: | 24,913 |
|------------|---------------------|-------------------|---------|
| Signature: | 6 mm MErlens | Date: | 9/28/01 |
| Name: | C. Invin McClelland | Registration No.: | |

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Toyoji IKEZAWA, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

SALES MANAGEMENT SYSTEM AND METHOD THEREOF

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

| FOR | | NUMBER FILED | | | NUMBER EXTRA | RATE | CALCULATIONS |
|---|--------------------------------------|-----------------|--------|----|-----------------|----------|--------------|
| TOTAL CLAIMS | | 20 | - 20 | =_ | 0 | × \$18 = | \$0.00 |
| INDEPENDENT CLAIMS | | 4 | - 3 | = | 1 | × \$80 = | \$80.00 |
| ☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$270 = | | | | | | | \$0.00 |
| | LATE FILING OF DECLARATION + \$130 = | | | | | | \$0.00 |
| | | \$710.00 | | | | | |
| | | \$790.00 | | | | | |
| | REDUCTION BY 50% F | \$0.00 | | | | | |
| | FILING IN NON-ENGL | + \$130 = | \$0.00 | | | | |
| 0 | RECORDATION OF AS | SIGN | MENT | | + \$40 = | \$0.00 | |
| | | | | | | TOTAL | \$790.00 |

Please charge Deposit Account No. 15-0030 in the amount of

A duplicate copy of this sheet is enclosed.

A check in the amount of

\$790.00

to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

Marvin J. Spivak

Registration No.

C. Irvin McClelland Registration Number 21,124

Tel. (703) 413-3000

Fax. (703) 413-2220 (OSMMN 10/00)

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